

ATTACHMENT 1

Procedure code conversion chart for case management services

The following table lists the nationally recognized procedure code that providers will be required to use when submitting claims for case management services. A future *Wisconsin Medicaid and BadgerCare Update* will notify providers of the specific effective dates for Wisconsin Medicaid's implementation of the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA).

Before HIPAA implementation		After HIPAA implementation		
Local procedure code	Local procedure code description	HCPCS* procedure code and description	First service modifier	Second service modifier (COP** or non-COP)
W7051	Assessment	T1017 Targeted case management, each 15 minutes	U1 (assessment)	U5 — COP U6 — non-COP
W7061	Case planning	T1017 Targeted case management, each 15 minutes	U2 (case planning)	U5 — COP U6 — non-COP
W7071	Ongoing monitoring and service coordination	T1017 Targeted case management, each 15 minutes	U3 (ongoing monitoring and service coordination)	U5 — COP U6 — non-COP
W7062	Discharge planning	T1017 Targeted case management, each 15 minutes	U4 (discharge planning)	U5 — COP U6 — non-COP

*HCPCS — Healthcare Common Procedure Coding System.

**COP — Community Options Program.